



August 9, 2018

TO: [REDACTED]  
Assistant Director for Detention Management

FROM: [REDACTED]  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT: **Annual Detention Inspection of the St. Clair County Jail**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2008) of the St. Clair County Jail in Port Huron, MI during the period of August 7-9, 2018. This is an IGSA facility.

The inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]

### **Type of Inspection**

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2008 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the August 2017 inspection.

### **Inspection Summary**

The St. Clair County Jail is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - No

### **Standards Compliance**

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2017 and 2018 annual inspections:



<b>2017 Annual Inspection</b>	
Meets Standard	39
Does Not Meet Standard	0
At-Risk	0
Repeat Finding	0
Not Applicable	2

<b>2018 Annual Inspection</b>	
Meets Standard	39
Does Not Meet Standard	0
At-Risk	0
Repeat Finding	0
Not Applicable	2

The inspection team identified twenty-nine (29) deficient components in the following eighteen (18) standards:

- Emergency Plans - 1
- Environmental Health and Safety – 1
- Admission and Release – 2, one of which is a repeat finding
- Classification System – 1
- Contraband – 1, which is a priority component
- Facility Security and Control – 1
- Key and Lock Control – 1
- Post Orders – 2
- Searches of Detainees - 1
- Staff Detainee Communication – 2
- Tool Control – 1, which is a priority component and a repeat finding
- Disciplinary System – 1, which is a priority component
- Food Service – 1
- Medical Care – 3, one of which is a priority component
- Telephone Access – 2, one of which is a repeat finding
- Visitation – 1, which is a priority component and a repeat finding
- Detainee Handbook - 6, two are repeat findings of which one is a priority component
- Detention Files - 1

### **Facility Snapshot/Description**

The St. Clair county Jail is owned by St. Clair County and is operated under the jurisdiction of the St. Clair County Sheriff's Department.

ICE detainees are housed with other populations of similar custody levels. With the exception of the dedicated segregation management units, all housing units consist of dormitory style beds. The housing units contain a large dayroom area with tables and chairs. Detainees have access to various board and card games. Televisions are available in the living and sleeping areas but not in the dayrooms. An outdoor recreation area is adjacent to each housing unit and is available seven days a week. Sanitation was observed to be average with some mold and soap scum noted in the showers. The atmosphere was relaxed and detainees were observed interacting with facility staff and other detainees. They approached the inspection team without hesitation.

The telephonic translation line was used to conduct three interviews of male LEP detainees from Mexico. All three detainees stated they felt safe at the facility. Their length of stay ranged from one day to three weeks. Two



of the detainees stated that during classification/orientation they did not understand the entire classification process and were told to sign forms that they did not understand completely, and one detainee stated all the forms were in English. One detainee reported that they used the language line for part of the interview. None of the detainees expressed any concerns about the facility. They stated they receive at least two hot meals per day, were able to go outside for recreation, and were able to see medical staff when needed. Two of the three indicated they were able to make a phone call to family upon arrival and the third indicated that after being here three weeks he finally was able to make a call to family. He gave conflicting information regarding the reason that he had been unable to contact his family. All detainees have access to telephones in the intake area upon arrival at the facility.

One detainee stated that he did not know how to contact ICE and that information was provided to him by the inspectors. All three stated that they received the National Detainee Handbook upon arrival. It was the conclusion of the inspectors that the LEP detainees did not totally understand the intake process and signed forms after being told to "sign here". Additionally, the detainees received little instruction on how to operate the tablets to access the facility handbook and what instruction was given was in English.

The translation line used by the facility did not provide translation for the language, Tgrinya, spoken by the female LEP detainee. A translator was finally located with the assistance of the on-site ICE officer. The detainee stated that facility staff and the detainees treated her well and she felt safe in the facility. Her only complaint was that the food served by the facility was causing digestive problems and she was unable to eat it. When asked if she knew how to request medical care she stated that she did not but that when they called her she went out and met with the nurse. Facility staff advised the inspectors that the detainee would only eat fresh vegetables and the vegetables served by the facility were normally canned. It was determined that medical personnel check on the detainee and weigh her daily. She is provided with the dietary supplement Ensure every day. She is also being seen by mental health professionals on a regular basis.

The inspection team visited the housing units several times during the inspection to conduct group and confidential interviews. No detainees expressed any concerns about their safety. There were no concerns regarding telephones, the law library or recreation. Two detainees expressed concerns regarding the issuance of razors. Both claimed that because they were ICE detainees that they were entitled to have a razor anytime they asked for one. Unit officers were found to have issued razors according to established policy that is published in the handbook.

One detainee stated he was diabetic and did not receive the medications he was taking prior to being taken into custody. Review of his medical record did not confirm his statement. He is not diabetic but is asthmatic and has been issued an inhaler. Several detainees complained of medical issues such as foot fungus, hernia, constipation and being unable to get dental treatment. Review of their medical records revealed that all of them have been receiving treatment for the medical issues and the detainee with dental issues has been evaluated and his records have been requested from his previous detention sites.

Numerous detainees stated that they were either unaware that the facility handbook was available on the tablets in the housing units, were unable to access the handbook when they tried or that they received no instruction on how to use the tablets. It was noted that there were only eight tablets in the large housing units which house 82 detainees. This is a concern as detainees are required to use the tablets to send a sick call request, to send ICE requests and to file a grievance. Two detainees stated that they don't receive copies of their "Kites" or grievances because they are filed on the tablet and they must pay for copies. Per the lieutenant, ICE detainees are not charged for copies of forms. The handbook states that detainees are charged for copies and does not differentiate between ICE and non-ICE detainees.

Several detainees complained about an officer who constantly expresses his political views regarding ICE detainees and the current administration and that he turns the TV volume up when anti-immigrant rallies are on



and the crowd is chanting “build the wall”. This information was given to the Lieutenant who stated that they are aware of these concerns about the officer and have had other issues with him in the past which are being dealt with by the administration.

The facility does not charge ICE detainees co-pays for medical, mental health or dental care. Health services are provided pursuant to a contract with Lake Huron Medical Services in Port Huron, MI. Food service is provided by Aramark.

### **Areas of Concern/Significant Observations**

The inspection team identified six (6) deficient priority components:

#### **Contraband**

*Component #1-* The facility follows a written procedure for disposition and handling contraband to include proper destruction of contraband and return of property not needed as evidence.

*Finding:* Policy and procedure does not address the proper destruction of contraband. Current policy only requires the on-duty sergeant to consult with the on-duty lieutenant to determine proper disposition of a contraband item.

*Recommendation:* Revise policy and procedure to provide documentation and witness to the destruction of the contraband.

#### **Tool Control**

*Component #3-* Each facility administrator shall develop and implement a written tool control and storage system to include a tool classification system, and there are policy and procedures in place to ensure that all tools are properly marked and readily identifiable.

*Finding:* Tools in the food service area were not marked and readily identifiable, and a check of the medical bulk inventory found that the disposable scalpels and staple removal kits had no inventories, and the inventory of butterfly needles was incorrect. This is a repeat finding.

*Recommendation:* Mark tools in food service to ensure they are readily identifiable and create and correct inventories in the medical bulk storage area.

#### **Disciplinary System**

*Component #4-* The facility supplemental handbook issued to each detainee upon admission shall provide notice of the facility’s rules of conduct and prohibited acts, the sanctions imposed for violations of the rules, the disciplinary severity scale, the disciplinary process, and the procedure for appealing disciplinary findings.

*Finding:* The facility handbook is not issued to each detainee upon admission.

*Recommendation:* Issue a facility handbook to each detainee upon admission.

#### **Medical Care**



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*Component #25-* Upon completion, the in-processing health screening form shall be forwarded to the facility medical staff for appropriate action. The clinical medical authority shall be responsible for review of all health screening forms within 24 hours or next business day to assess the priority for treatment.

*Finding:* Upon completion, in-processing health screenings are forwarded to medical personnel for review. Per the nurse administrator and confirmed by the review of medical records, the clinical medical authority does not review all health screening forms within 24 hours or the next business day.

*Recommendation:* The clinical medical authority must review all health screening forms within 24 hours or the next business day to assess the priority for treatment.

## **Visitation**

*Component #5-* General visitation is permitted during set hours on Saturday, Sunday, and holidays, and, to the extent practicable, the facility accommodates the scheduling needs of visitors for whom weekends and holidays pose a hardship. The number of visitors a detainee receives and the length of visits are limited only by reasonable constraints of space, scheduling, staff availability, safety, security, and good order. The minimum duration for a visit is thirty minutes.

*Finding:* General visitation is permitted during set hours on Sunday through Thursday and holidays. Visitation is not permitted on Saturday. This is a repeat finding.

*Recommendation:* In addition to the current visitation schedule, general visitation should be permitted during set hours on Saturdays.

## **Detainee Handbook**

*Component #1-* Upon admission to a facility, as part of the orientation program, each detainee shall be provided a copy of the ICE National Detainee Handbook and that facility's local supplement to the handbook.

*Finding:* Upon admission, each ICE detainee is not provided a copy of the local supplement to the ICE National Detainee Handbook. The local supplement is available to ICE detainees in an electronic format on tablets that are available in each housing unit. This is a repeat finding.

*Recommendation:* During the admission process, the facility should provide each ICE detainee with a copy of the local supplement to the ICE National Detainee Handbook.

## **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Does Not Meet Standards. The facility does not comply with the ICE Performance Based National Detention Standards (PBNDS) 2008 for Over 72 hour facilities as evidenced by six (6) priority components rated as Does Not Meet Standard. No (0) standards were found Does Not Meet Standards and two (2) standards were Not Applicable (N/A). All remaining thirty-nine (39) standards were found to Meet Standards.

## **LCI Assurance Statement**



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The findings of compliance and non-compliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]
- Facility Staff – [REDACTED] numerous other facility and contract staff.

[REDACTED], Lead Compliance Inspector August 9, 2018  
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Printed Name of LCI Date